

PATENT

Attorney Docket No.: 132733

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Hernan Altman

Group No.: 2882

Serial No.:

10/801,918

Examiner:

Filed:

March 16, 2004

For:

METHODS AND SYSTEMS

FOR MULTI-MODALITY

IMAGING

Mail Stop: Amendment Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

TRANSMITTAL

1. Transmitted herewith is:

Amendment Transmittal which includes Certificate of Express Mail (3 pgs.) NO FEE Amendment in response to Office Action dated March 28, 2005 (22 pgs.) Return Postcard

STATUS

2. Applicant

claims small entity status.
is other than a small entity.

CERTIFICATE OF MAILING BY EXPRESS MAIL TO THE COMMISSIONER FOR PATENTS

Express Mail No. EV593387464US

Date: May 31, 2005

I hereby certify that the documents listed above are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. §1.10 on the date indicated above in an envelope addressed to Mail Stop: Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

William J. Zychlewicz, Reg. No. 51,366

EXTENSION OF TERM

| 3. | The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. | | | | | | | | | | |
|------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|-----------------------------|----------------------------------|--|--|--|--|--|--|--|
| | (complete (a) or (b), as applicable) | | | | | | | | | | |
| | (a) Applicant petitions for an extension of time under 37 C.F.R. 1.136 (Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:) | | | | | | | | | | |
| | | Extension for response within: | Other than small entity Fee | Small entity Fee (if applicable) | | | | | | | |
| | | first month | \$ 120.00 | \$ 60.00 | | | | | | | |
| | | second month | \$ 450.00 | \$ 225.00 | | | | | | | |
| | | third month | \$ 1,020.00 | \$ 510.00 | | | | | | | |
| | | fourth month | \$1,590.00 | \$ 795.00 | | | | | | | |
| | | fifth month | \$2,160.00 | \$1,080.00 | | | | | | | |
| | | | Fee: | \$ | | | | | | | |
| | —————————————————————————————————————— | | | | | | | | | | |
| If a | If an additional extension of time is required, please consider this a petition therefor. | | | | | | | | | | |
| | (Check and complete the next item, if applicable) | | | | | | | | | | |
| | An extension of months has already been secured. The fee paid therefor \$ is deducted from the total fee due for the total months of extension now requested. | | | | | | | | | | |
| | Extension fee due with this request \$ | | | | | | | | | | |
| | OR | | | | | | | | | | |
| | (b) X Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time. | | | | | | | | | | |
| | | | | | | | | | | | |

FEE FOR CLAIMS

| | (Col. 1) | | | · | | SMALL ENTITY | shown below: OTHER THAN | | | | |
|-----------------|-----------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|--------|---------------------------------------|------------------|-----------------------------------------------------|-------------------------|-------------------------|--|--|--|
| | - | | | (Col. 2) | (Col. 3) | SMALL ENTITY | | SMALL ENTITY | | | |
| | CLAIMS REMAINING AFTER AMENDMENT | | | HIGHEST NO. PREVIOUSLY PAID FOR | PRESENT EXTRA | ADDITIONAL. RATE FEE | OR | ADDITIONAL RATE FEE | | | |
| | | | MINUS | PAIDFOR | = | x \$25.00 = \$ | T | x \$50.00 = \$ | | | |
| TOTAL INDEP. | | | MINUS | | = | x \$100.00 = \$ | | x \$200.00 = \$ | | | |
| | FIRST PRESENTATION OF | | | MULTIPLE DEP. (| CLAIM | + \$180.00 = \$ | | + \$360.00 = \$ | | | |
| - | | | | 1 | | TOTAL ADDITIONAL FEE \$ | OR | TOTAL ADDITIONAL FEE \$ | | | |
| | (a) | \boxtimes | No add | itional fee fo | r Claims is | required | | | | | |
| | | | | | OR | | | | | | |
| | (b) Total additional fee for claims required \$ | | | | | | | | | | |
| | | | | FEE : | PAYMEN' | Т | | | | | |
| 5. | Attached is a check in the sum of \$ | | | | | | | | | | |
| | | Charge Deposit Account No. 01-2384 the sum of \$ A duplicate of this transmittal is attached. | | | | | | | | | |
| | | | | FEE D | EFICIEN | CY | | | | | |
| 6. | \boxtimes | If any additional extension and/or fee is required, charge Deposit Account No. 01-2384. | | | | | | | | | |
| | | | | A | ND/OR | | | | | | |
| | If any additional fee for claims is required, charge Deposit Account No. 02 2384. | | | | | | | | | | |
| 7. | | Other: | | | | | | | | | |
| | | | | | Reg AR | liam J. Zychlewicz 3. No. 51,366 MSTRONG TEAS | DAL | | | | |

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